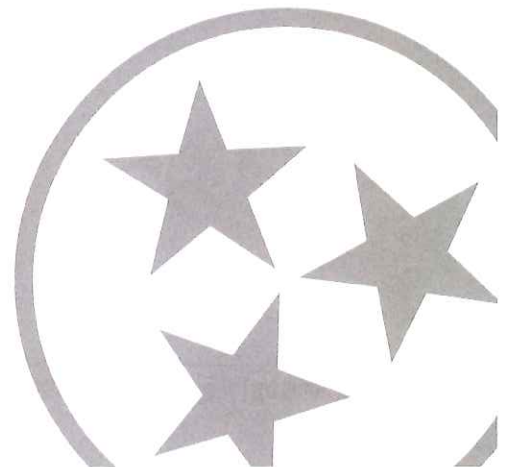




# 2020 Annual Report of the Division of Health Planning

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Tennessee Department of Health | September 2021



# Table of Contents

Executive Summary.....	3
Introduction and Overview .....	6
Division of Health Planning Accomplishments, 2020.....	11
2020 Edition of the State Health Plan.....	11
Certificate of Need.....	15
Joint Annual Reports.....	15
Certificate of Public Advantage.....	16
Future Work.....	18
2021 Edition of the State Health Plan.....	18
Certificate of Need.....	18
Joint Annual Reports.....	18
Certificate of Public Advantage.....	19
Appendix A .....	20
About the Division of Health Planning.....	20
Certificate of Public Advantage.....	21
References.....	<b>Error! Bookmark not defined.</b>

# Executive Summary

## ***Introduction to the Division of Health Planning***

The Division of Health Planning was created by the General Assembly and is tasked with multiple responsibilities that assist the Tennessee Department of Health (TDH or the Department) in improving health across the state. These responsibilities include the State Health Plan, Certificate of Need, the State Oral Health Plan, Joint Annual Reports, and the Certificate of Public Advantage.

## ***Division of Health Planning Accomplishments, 2020***

### **2020 Edition of the State Health Plan**

In accordance with Tennessee law, the 2020 Edition of the State Health Plan was approved and adopted by Governor Bill Lee, after first having been reviewed by the Health Services and Development Agency (HSDA).<sup>1</sup> The 2020 Edition of the State Health Plan is comprised of three primary parts: 1) detailed information on changes in the health status of people in Tennessee; 2) a progress report on the implementation of the 2019 State Health Plan recommendations; and 3) information on plans for future editions of the State Health Plan.

### **Certificate of Need**

The 2020 Edition of the State Health Plan does not include any revisions to the existing Certificate of Need (CON) Standards and Criteria. Health Planning utilizes a wide array of stakeholders with expertise in health care during the revision process, and due to the ongoing COVID-19 pandemic, such stakeholders were unavailable to advise.

### ***Certificate of Need Application Review***

In 2020, staff of the Division reviewed and drafted reports analyzing 25 CON applications on behalf of the Department. These reports are submitted to the HSDA to provide additional information for the Agency and Board to consider during their application review process.

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<sup>1</sup> The State Health Plan is available at the following link: <https://www.tn.gov/health/health-program-areas/state-health-plan.html>.

### **Joint Annual Reports**

The Joint Annual Report (JAR) staff collected and provided data for over 1,100 licensed health care facilities in 2020. Additionally, throughout 2020 this area continued to expand its efforts to move these forms to a web-based collections system that reduces the time needed for collection and provides a more user-friendly format.

### **Certificate of Public Advantage**

2020 was the Department's third year actively supervising Ballad Health. In this role, the Department, with the Division's support, provided active supervision to 1) enforce the COPA, the TOC, and other terms and conditions and 2) evaluate and determine whether Ballad's operations continue to result in a Public Advantage.

### **COVID-19**

In March of 2020 the Department suspended certain provisions of the TOC to better allow Ballad Health to respond to the unprecedented circumstances they were presented with resulting from the COVID-19 pandemic. The temporary suspension began March 1, 2020 and remains in effect today.

### ***The Department Annual Report***

Though many reporting and regulatory burdens were temporarily suspended for Ballad Health, Health Planning continued to prepare, and on April 6, 2020, published the COPA 2020 Department Annual Report. The report ultimately presented the Department's determination that an ongoing public advantage was maintained for the year.

## **Future Work**

### **Future Editions of the State Health Plan**

This year has provided the Division of Health Planning with the opportunity to begin a comprehensive strategic planning process for the future of the State Health Plan to ensure it is a meaningful and useful tool for both the Department and the Department's public and private partners across the state. Health Planning will be engaging a diverse and extensive network of partners to gather expertise and to ensure the diverse needs of Tennesseans are being heard by the Department and addressed through the State Health Plan.



### **Certificate of Need**

Public Chapter 557 made significant changes to Health Planning's CON responsibilities. This legislation has made the HSDA responsible for revising the certificate of need standards and criteria going forward. Additionally, Public Chapter 557 made the Department's review and analysis of CON applications permissive rather than required.

### **Joint Annual Reports**

In 2021 work will continue to move the rest of the JAR forms to the web-based system as part of the Division's efforts to better serve its customers. This section of the Division will also continue its work assisting customers, performing data verification, and responding to data requests.

### **Certificate of Public Advantage**

In 2021, Health Planning will continue to support TDH as it provides active supervision over the COPA to protect the interests of the public in the COPA region. Specifically, Health Planning will consider amendments to strengthen and clarify provisions in the Terms of Certification and to improve efficiencies in how public input is received by the Department.

As vaccination rates increase and the impact of COVID-19 on Ballad Health as well as those residing in its geographic service area is mitigated, the Division will provide guidance on reinstating provisions of the TOC that were suspended to allow Ballad to focus on and respond to the public emergency.

## Introduction and Overview

The Division of Health Planning was created by the General Assembly and is tasked with multiple responsibilities that assist the Department in improving health across the state. These responsibilities include the State Health Plan, Certificate of Need, State Oral Health Plan, Joint Annual Reports, and the Certificate of Public Advantage.

### ***Background on the Division of Health Planning***

Recognizing the need for the state to coordinate its efforts to improve the health and welfare of the people of Tennessee, the General Assembly passed Public Chapter 0942 in 2004. This act created a Division of Health Planning that was charged with three primary roles.

1. Create a State Health Plan that:
  - a. guides state health care programs and policies, and
  - b. guides the allocation of state health care resources.
2. Provide policy guidance to:
  - a. respond to requests for comment and recommendations for health care policies and programs, and
  - b. review and comment on federal laws and regulations.
3. Assess health resources and outcomes to:
  - a. conduct an ongoing evaluation of Tennessee's resources for accessibility,
  - b. review the health status of Tennesseans, and
  - c. involve and coordinate functions with such State entities as necessary to ensure the coordination of State health policies and programs.

In addition to these statutorily directed responsibilities, the Division has, over time, been awarded the opportunity to work in additional spaces in service to the Department and the state.

## State Health Plan

The development and continual updating of a comprehensive plan – the State Health Plan – is critical for successfully improving population health outcomes and the value of health care that is delivered. The responsibility for improving the health of Tennesseans is housed among multiple state divisions and agencies and among numerous private sector partners, each with its own responsibilities, plans, and strategies to meet them. The Division of Health Planning was created by statute to ensure that related programs and services across the state are coordinated and leveraged to improve health outcomes for Tennesseans.<sup>2</sup>

### Five Principles for Achieving Better Health

1. The purpose of the State Health Plan is to improve the health of people in Tennessee;
2. People in Tennessee should have access to health care and the conditions to achieve optimal health;
3. Health resources in Tennessee, including health care, should be developed to address the health of people in Tennessee while encouraging value and economic efficiencies;
4. People in Tennessee should have confidence that the quality of care is continually monitored and standards are adhered to by providers; and
5. The state should support the development, recruitment, and retention of a sufficient and quality health workforce.

### *Five Principles for Achieving Better Health*

To achieve these goals of coordinating efforts and improving population health in the state, the State Health Plan uses the Five Principles for Achieving Better Health. The Five Principles are derived from the statute and now include a specific focus on population health as well as health care.

### *Population Health Improvement*

In its early years, the State Health Plan focused primarily on the allocation of health care resources. However, recognizing the significant impact that “upstream” prevention efforts have on improving the health outcomes of Tennesseans, the State Health Plan shifted to a focus on population health improvement, highlighting the first principle for achieving better health.

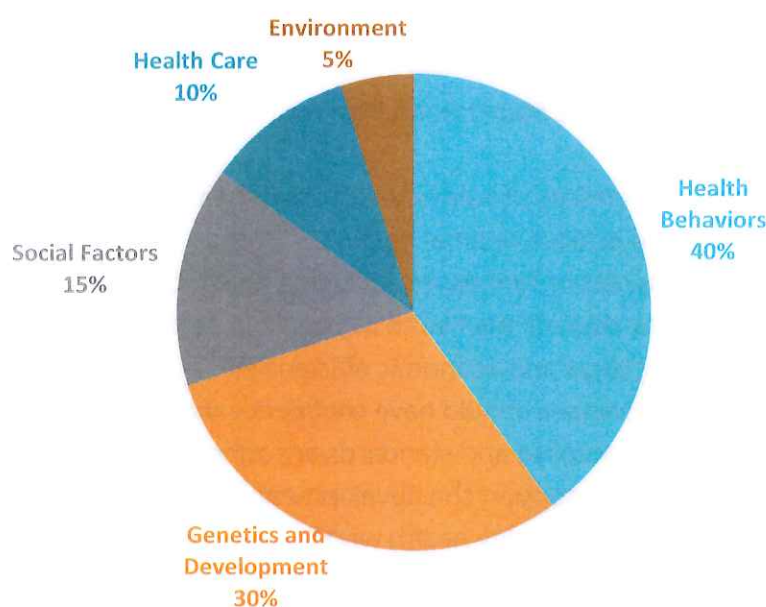
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<sup>2</sup> See Appendix A for a full discussion of the roles and duties set forth by the enabling statute.



While health care plays a crucial role in the lives of individuals, numerous factors outside of health care contribute to the health of individuals and the population, including behaviors, culture, the environment, economic and social determinants, and genetics. When efforts shift from a primary emphasis on improving health care to addressing population health and primary prevention initiatives, opportunities arise to prevent many health concerns from ever taking occurring.

**Figure 1: What Impacts our Health?**



Sources: McGinnis JM & Foege WH. Actual causes of death in the United States. JAMA 4993: 270(18):2207-12 (Nov. 10)  
McGinnis JM, Williams-Russo P, & Kinckman JR. The case for more active policy attention to health promotion. Health Affairs  
2002; 21(2):78-93 (Mar).

### *Partners*

The people of Tennessee are fortunate to have a number of government programs and non-governmental organizations dedicated to improving population health and health care access. These groups make important contributions to health improvement efforts and have the potential to make an even greater impact by working collaboratively. Each update to the State Health Plan engages numerous private and public stakeholders to provide opportunities for partnership. These stakeholders include faith-based leaders and faith-based community members, non-profits, community leaders and advocates, members of the public, health care industry representatives, and association groups, among others.



### **Certificate of Need**

A certificate of need (CON) is a permit for the establishment or modification of a health care institution, facility, or service at a designated location. Tennessee's CON program seeks to deliver improvements in access, quality, and cost savings through orderly growth management of the state's health care system.

The Division of Health Planning is statutorily charged with developing and revising the Standards and Criteria that guide the Health Services and Development Agency (HSDA) and Board during the application review and decision-making processes.

The Division has established the following thorough and transparent process for revising CON program area standards and criteria.

1. The Division staff researches the issues, paying particular attention to national professional standards and other states' CON standards. The Health Services and Development Agency staff provides additional resources in this process, including research and information on specific issues encountered with recent CON applications.
2. Division staff members conduct interviews with a broad range of stakeholders (e.g., for-profit, non-profit, urban, rural, hospital-based, non-hospital-based, etc.) to gain additional expert insight.
3. From the interviews, additional questions are developed and distributed to stakeholders for responses.
4. The responses to the questions are used to develop a draft of revised standards and criteria. This draft is sent out to stakeholders for comment, including the Health Services and Development Agency.
5. Division staff members conduct a public hearing on the draft revisions.
6. Revised standards and criteria, which provide more objective ways for the Health Services and Development Agency to determine whether a need for a facility, service, or piece of equipment is needed, are then finalized and included in the draft update to the State Health Plan for eventual approval and adoption by the Governor.

Additionally, as statutorily required, Health Planning reviews all CON applications and provides reports that analyze the proposed project to the HSDA to assist in reviewing applications and making determinations.

### **Joint Annual Reports**

Health Planning collects data from a variety of licensed health facilities through annual reports known as Joint Annual Reports (JARs). Data collected include facility locations, services provided, patient origin by county, and financial indicators. The following facilities are included in the JARs: Assisted Care Living Facilities, Ambulatory Surgical Treatment Centers, Nursing Homes, Hospice, Hospitals, Outpatient Diagnostic Centers, and Home Health.

### **Certificate of Public Advantage**

A Certificate of Public Advantage (COPA) is a document issued by TDH that permits a Cooperative Agreement (a merger) among hospitals. A COPA provides state action immunity to the hospitals from state and federal antitrust laws by replacing competition with state regulation and active supervision. The goal of the COPA process is to protect the interests of the public in the affected region and the State. TDH has the authority to issue a COPA if it determines that the likely benefits of the proposed Cooperative Agreement outweigh the likely disadvantages that would result from the loss of competition. The ability to grant a COPA is authorized by Tennessee's Hospital Cooperation Act of 1993, amended in 2015. Permanent Rules [1200-38-01](#) implement T.C.A. § 68-11-1301 – 68-11-1309.

In January of 2018, the Department approved the merger of Wellmont Health System and Mountain States Health Alliance by issuing a COPA to their parent company, Ballad Health. The State required Ballad to agree to a number of terms and conditions that were set out in the Terms of Certification (TOC). Importantly, the TOC outlines the procedure for active supervision. This oversight includes the computation of a numerical score for three Sub-Indices and a pass or fail score for a fourth Sub-Index. When combined, the Sub-Indices represent the Index, a composite score. The purpose of this Index is to provide an objective evaluation of whether there is a continuing public advantage from the merger by tracking progress in four categories: 1) Population Health; 2) Access to Health Services; 3) Economic; 4) Other (Quality). This Index is to be computed annually for 10 years.

Oversight is performed through an active supervision structure that includes the Tennessee Commissioner of Health, supported by the Division of Health Planning staff, the Office of the Attorney General, and an independent COPA Monitor.

The Division of Health Planning supports the Department in its active supervision of the Ballad Health COPA by ensuring compliance with the TOC, providing analysis and recommendations on reports, plans, and requests submitted by Ballad Health, and conducting an annual determination of ongoing public advantage for the residents of northeast Tennessee by tracking and assessing health access, quality, and health outcomes in the COPA region.

## Division of Health Planning Accomplishments, 2020

### ***2020 Edition of the State Health Plan***

In accordance with Tennessee law, the 2020 Edition of the State Health Plan was approved and adopted by Governor Bill Lee, after first having been reviewed by the HSDA.<sup>3</sup> The 2020 Edition of the State Health Plan is comprised of three primary parts: 1) detailed information on changes in the health status of people in Tennessee; 2) a progress report on the implementation of the 2019 State Health Plan recommendations; and 3) information on plans for future editions of the State Health Plan.

#### **Health Status of Tennessee: Vital Signs**

Tennessee's Vital Signs are 12 metrics, selected through an extensive public engagement process, meant to measure the pulse of Tennessee's population health. Tennessee's Vital Signs seek to provide an objective answer to the question, "How healthy is Tennessee?" The Vital Signs include both health outcomes and social determinants of health to help the Department and its partners think about factors that influence the health of the state. Because the Vital Signs include metrics like 3<sup>rd</sup> grade reading level and frequent mental distress, they offer an opportunity for the Department to partner with other state agencies to improve health and well-being in the state.

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<sup>3</sup> The State Health Plan is available at the following link: <https://www.tn.gov/health/health-program-areas/state-health-plan.html>.



**Figure 2: Tennessee Vital Signs**

Youth Obesity	40%	Percent of public school students with a BMI greater than or equal to the 85 <sup>th</sup> percentile
Physical Activity	70%	Percent of adults who reported doing physical activity during the last 30 days other than their regular job
Youth Nicotine Use	22%	Percent of high school students who used electronic vapor products on at least one day during the last 30 days
Drug Overdose	23,565	Number of drug overdose outpatient visits and inpatient stays caused by non-fatal acute poisonings due to the effects of drugs, regardless of intent
Infant Mortality	6.9	Number of infant deaths per 1,000 live births
Teen Births	25.3	Number of births per 1,000 women aged 15-19 years
Community Water Fluoridation	89%	Percent of population served by community water systems that are receiving fluoridated water
Frequent Mental Distress	16%	Percent of adults who reported their mental health was 'not good' 14 or more days during the past 30
3 <sup>rd</sup> Grade Reading Level	37%	Percent of public school 3rd graders that are reading at grade level
Preventable Hospitalization	1,531	Hospitalization rate for ambulatory care-sensitive conditions per 100,000 adults
Per Capita Personal Income	\$48,684	Annual, not seasonally adjusted, per capita personal income in dollars
Access to Parks and Greenways	70%	Percent of population with adequate access to locations for physical activity

\*Color Indicates 3 Year Trend: green is moving in a positive direction, yellow is stagnant, red is moving in a negative direction



### **Implementation of the 2019 State Health Plan: Cognitive and Brain Health across the Lifespan**

Recognizing Tennessee's population is aging, the 2019 Edition of the State Health Plan was a deep-dive into healthy aging with an emphasis on cognitive and brain health across the lifespan. The deep-dive was conducted by the Division of Health Planning in partnership with the Office of Patient Care Advocacy (OPCA). Tennessee has many different agencies, organizations and professionals working to support healthy aging, and public health can play a significant role by connecting and convening the multiple sectors that provide the supports, technical services, policies, and infrastructure to promote healthy aging. This deep-dive served as an opportunity for the Department to increase collaboration with these public and private partners.

In order to complete this work and develop a series of recommendations, Health Planning, OPCA, and Minority Health and Disparities Elimination (OMHDE) conducted a series of 10 focus groups across the state. Industry stakeholders, community members, faith-based leaders, and caregivers, among others, attended these meetings. Through these meetings three recommendations were developed.

1. Dementia friendly communities,
2. Dementia Risk Reduction Education: Public Health Workforce, Health Care Providers, and Members of the Public, and
3. Healthy Aging across the Lifespan Summit.

OPCA has been working actively with partners across the state to implement these recommendations as part of its efforts to prevent cognitive decline and improve the lives of older Tennesseans.

#### *Dementia Friendly Communities*

In November 2019, the OPCA released a Tennessee Dementia Friendly Request for Applications that would award grantees funding to implement dementia friendly principles. There were three grantees chosen to implement activities such as caregiver supports, community education, first responder education, healthcare provider education, and business engagement activities. The grantees began activities in March 2020 and continue to raise awareness of dementia and to support those living with dementia and their caregivers in their local communities. The OPCA created a Tennessee specific dementia friendly toolkit utilizing best practices and evidence informed guidance for local communities, including the three grantees, to utilize in their efforts. Materials and best practices related to the Tennessee Dementia Friendly Community initiative

continue to be developed and posted on the new Tennessee Dementia Friendly Community website so that local communities can utilize them as appropriate.

#### ***Dementia Risk Reduction Education***

As part of the Tennessee Dementia Friendly Community initiative, the OPCA worked with several partners to further expand efforts related to dementia risk reduction. TDH worked with several community partners, including state legislators, to develop risk reduction videos to raise awareness of the risk factors associated with dementia. In addition, the OPCA and the OMHDE developed the first annual 2019 Alzheimer's and Comorbidities County Profiles to help local communities further define chronic conditions that impact older adults and identify risk factors that can assist in decreasing the prevalence of chronic conditions among older adults. A brief introduction is provided for communities highlighting ways in which they can utilize the profiles.

#### ***Healthy Aging across the Lifespan Summit***

TDH is currently working with several partners to host several meetings for various stakeholders focused on issues that impact older adults or seniors. TDH is partnering with University Tennessee at Chattanooga to host a provider training focused on care coordination, diagnosis, advanced care planning, and determining cause of death for older adults, specifically for those with dementia. In addition, TDH is partnering with the Alzheimer's Association to host a conference to bring together members of the faith community to discuss dementia and other items that impact older adults in TN's faith communities.

#### ***Other Successes***

Moving forward in 2021, TDH is partnering with the Alzheimer's Association, Methodist Le Bonheur Congregation Health Network, Shelby County Health Department, and Area Agency on Aging and Disability to implement the Tennessee Dementia Friendly Community Faith Toolkit in faith organizations in West Tennessee and guide them through an assessment, planning, and implementation process to meet the needs of those with dementia and their caregivers in the faith community. Through partnerships with other organizations, it is expected that these efforts will further drive faith communities in other regions of the state to engage in dementia risk reduction activities, awareness efforts, and services for those living with dementia and caregivers.

## ***Certificate of Need***

The 2020 Edition of the State Health Plan does not include any revisions to the existing Certificate of Need Standards and Criteria. Health Planning utilizes a wide array of stakeholders with expertise in health care during the revision process, and due to the ongoing COVID-19 pandemic, such stakeholders were unavailable to advise.

### **Certificate of Need Application Review**

In 2020, staff of the Division reviewed and drafted reports analyzing CON applications on behalf of the Department. These reports are submitted to the HSDA to provide additional information for the Agency and Board to consider during their application review process. The following types of applications were submitted and reviewed in 2020:

- 6 Ambulatory Surgical Treatment Centers
- 2 Free Standing Emergency Departments
- 1 Home Health
- 2 Hospice
- 3 Hospital
- 1 Long Term Care Hospital
- 2 Magnetic Resonance Imaging MRI
- 1 Nursing Home
- 4 Outpatient Diagnostic Center
- 1 Positron Electron Imaging PET
- 2 Rehabilitation Hospital

## ***Joint Annual Reports***

The Joint Annual Reports staff collected and provided data for over 1,100 licensed health care facilities in 2020. As part of the completion of this work, the Division provides significant support to facility representatives to ensure the reporting process is both accurate and convenient. Data verification is completed to confirm the accuracy of the data, and the Division meets regularly with private health care stakeholders to revise the JAR forms to improve the efficiency of the data collection process.



Throughout 2020 this area continued to move these forms to a web-based collection system that reduces the time needed to complete the form and provides a more user-friendly format. As of 2020 the following facility JARs have been transitioned to the web-based format:

- Nursing Homes
- Hospice
- Hospitals
- Home Health

### ***Certificate of Public Advantage***

January 31, 2020 marked the second anniversary of the issuance of the Ballad Health Certificate of Public Advantage (COPA). As a condition of the COPA, Ballad Health agreed to comply with certain ongoing regulations. Those regulations are detailed in the COPA Terms of Certification (TOC).

#### **Active Supervision**

2020 was the Department's third year actively supervising Ballad Health. In this role, the Department, with the Division's support, provided active supervision to 1) enforce the COPA, the TOC, and other terms and conditions and 2) evaluate and determine whether Ballad's operations continue to result in a Public Advantage. The Active Supervision Structure, as outlined in the TOC, includes a Ballad Health COPA Compliance Office, a Local Advisory Council, and a COPA Monitor.

The Division provided staff support to the Local Advisory Council and coordinated the ongoing monitoring of Ballad Health through the COPA Monitor and the COPA Compliance Office. The Division also assisted the Department in managing a process for collaboration and coordination on all aspects of active supervision with the Virginia Department of Health.



## **COVID-19**

In March of 2020 the Tennessee Department of Health suspended certain provisions of the TOC to better allow Ballad Health to respond to the unprecedented circumstances they were presented with resulting from the COVID-19 pandemic. The temporary suspension began March 1, 2020 and remains in effect today. A letter from the Tennessee Attorney General and Reporter and the Tennessee Commissioner of Health details the provisions that were temporarily suspended and states that the suspension is in effect during the period of public emergency (defined as the period during which there is a Governor's Executive Order declaring a state of emergency) and a reasonable recovery period thereafter.

## **The Department Annual Report**

Though many reporting and regulatory burdens were temporarily suspended for Ballad Health, Health Planning continued to prepare, and on April 6, 2020, published the COPA 2020 Department Annual Report required by the TOC, that incorporated findings from (i) Ballad Health's Periodic Reports, (ii) the COPA Compliance Office Annual Report, (iii) the Local Advisory Council Annual Report, (iv) the COPA Monitor Annual Report, (v) the Healthcare Access Report, and (vi) the Population Health Report. The Department Annual Report included a review of Ballad's Fiscal Year 19 compliance, the Sub-Index Scores, the Final Score, the Pass/Fail Grade, and trends relevant to the Active Supervision of the COPA and continued Public Advantage. The report ultimately presented the Department's determination that an ongoing public advantage was maintained for the year.

## Future Work

### ***Future Editions of the State Health Plan***

This year has provided the Division of Health Planning with the opportunity to begin a comprehensive strategic planning process for the future of the State Health Plan to ensure it is a meaningful and useful tool for both the Department and the Department's public and private partners across the state.

Under the leadership of Commissioner Piercey, the Department has developed a new strategic plan that prioritizes access and prevention. The State Health Plan will serve as an external facing tool to compliment the Department's strategic plan. The State Health Plan will include data, recommendations, and policy considerations for partners including, health councils, safety-net providers, non-profit organizations, health care systems and providers, and sister-state agencies. These tools will allow the Department and its partners to coordinate efforts across the state to improve population health.

Health Planning will be engaging a diverse and extensive network of partners to gather expertise and to ensure the diverse needs of Tennesseans are being heard by the Department and addressed through the State Health Plan.

### ***Certificate of Need***

Public Chapter 557 made significant changes to Health Planning's CON responsibilities. This legislation has made HSDA responsible for revising the certificate of need standards and criteria going forward. As such, Health Planning will no longer conduct the public engagement process for these revisions, and future editions of the State Health Plan will not contain standards and criteria. Additionally, Public Chapter 557 made the Department's review and analysis of CON applications permissive rather than required. The Department will be determining how to implement this change in statute in the coming months.

### ***Joint Annual Reports***

In 2021 work will move the rest of the JAR forms to the web-based system as part of the Division's efforts to better serve its customers. The forms for ambulatory surgical treatments centers, outpatient diagnostic centers, and assisted care living facilities are next in line for this transition. This section of the Division will also continue its work assisting customers, performing data verification, and responding to data requests.

### ***Certificate of Public Advantage***

In 2021, the Division will continue to support TDH as it provides active supervision over the COPA to protect the interests of the public in the COPA region. Specifically, the Division will consider amendments to strengthen and clarify provisions in the Terms of Certification and to improve efficiencies in how public input is received by the Department.

As vaccination rates increase and the impact of COVID-19 on Ballad Health as well as those residing in its geographic service area are mitigated, the Division will provide guidance on defining a recovery period that is reasonable for reinstating provisions of the TOC that were suspended to allow Ballad to focus on and respond to the public emergency.

Additionally, Health Planning will review and provide recommendations on each of Ballad Health's three-year plan extension requests and plan modification proposals. Extensions were proposed in lieu of drafting - in a pandemic year - new three-year plans for Behavior Health, Children's Health, Rural Health, Population Health, Health Research and Graduate Medical Education, and Health Information Exchange.

With improvements in the status of COVID-19, the State expects to resume paused discussions on data methodology and evaluation metrics in 2021. The Division will engage with internal data stewards as well as external consultants to evaluate Ballad's proposals for changes. The Division will provide recommendations to the Commissioner that take into consideration the possibility that COVID-19 will have medium and long-term impacts on the COPA Index measures.



# Appendix A

## ***About the Division of Health Planning***

### **Primary Roles**

The Division of Health Planning was created by action of the Tennessee General Assembly and signed into law in 2004 (TCA § 68-11-1625). It is charged with three primary roles.

- Creating a State Health Plan that:
  - Guides state health care programs and policies and
  - Guides the allocation of state health care resources
- Providing policy guidance to:
  - Respond to requests for comment and recommendations for health care policies and programs and
  - Review and comment on federal laws and regulations
- Assessing health resources and outcomes to:
  - Conduct an ongoing evaluation of Tennessee's resources for accessibility (financial, geographic, cultural) and quality and
  - Review the health status of Tennesseans

### **Additional Duties**

The Division has the following additional specific duties set out by statute.

- Regarding the State Health Plan:
  - To submit the State Health Plan to the Health Services and Development Agency for comment,
  - To submit the State Health Plan to the Governor for approval and adoption,
  - To hold public hearings as needed,
  - To review and evaluate the State Health Plan at least annually, and



- To establish a process for timely modification of the State Health Plan in response to changes in technology, reimbursement and other developments that affect the delivery of health care.
- Other statutory duties are:
  - To respond to requests for comment and recommendations for health care policies and programs,
  - To conduct an ongoing evaluation of Tennessee's resources for accessibility, including, but not limited to, financial, geographic, cultural and quality of care,
  - To review the health status of Tennesseans as presented annually to the Division by the Department of Health and the Department of Mental Health and Developmental Disabilities,
  - To review and comment on federal laws and regulations that influence the health care industry and the health care needs of Tennesseans,
  - To involve and coordinate functions with such state entities as necessary to ensure the coordination of state health policies and programs, and
  - To prepare an annual report for the General Assembly and recommend legislation for its consideration and study.

### ***Certificate of Public Advantage***

The Division has the following additional duties related to the COPA.

- Coordinate the monitoring of Ballad health,
  - coordinate active supervision with the Attorney General's, the COPA Monitor, and the Virginia Department of Health staff,
  - oversee the work product of the COPA Monitor and confirm such work product fulfills required obligations, and
  - assist the COPA Monitor in obtaining relevant data from the Department and other sources,
  - schedule and organize an annual public hearing,
- Review notices, requests, reports, and plans submitted by Ballad Health and provide advice to the Commissioner,

- Draft the Department's Annual Report that incorporates the findings from (i) Ballad Health's Periodic Reports, (ii) the COPA Compliance Office Annual Report, (iii) the COPA Monitor Annual Report, (iv) the Healthcare Access Report, and (v) the Population Health Report, and
- Assist the Department in its Annual Review and determination of Public Advantage.